

Employment Services and Supports Program - Participant Intake Worksheet

Agreement Number: _____

Participant Identification

Participant Name: _____ / _____ / _____
First Name Middle Name Last Name

Date of Birth: _____ / _____ / _____
Year / Month / Day

Type of Participant Identification Used:

- BC Driver's License
- BCID
- Birth Certificate
- Other (please specify): _____

NOTE: Indicate only the type of identification that was used to confirm the participant identity.

Personal Phone: (_____) _____

Alternate Phone (optional): (_____) _____

Email Address: _____

Residential Address: _____

Road Address

City / Town

Postal Code

If your Residential Address is different than your Mailing Address then complete the following:

Mailing Address: _____

Mailing Address

City / Town

Postal Code



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1. Citizenship – Are you a:

Canadian Citizen Permanent Resident Protected Person entitled to work in Canada

2. Gender: Male Female Other

3. Do you consider yourself a Person with a Disability?

Yes No Prefer not to answer

4. Do you identify yourself as a visible minority?

The Employment Equity Act defines visible minorities as "persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour". The visible minority population consists mainly of the following groups: Chinese, South Asian, Black, Arab, West Asian, Filipino, Southeast Asian, Latin American, Japanese and Korean.

Yes No Prefer not to answer

5. Do you identify yourself as an Aboriginal Person (First Nations, Métis or Inuit)?

Yes No Prefer not to answer

*If Yes, answer 3a & 3b

3a. If you identify as an Aboriginal Person, are you:

First Nations Métis Inuit Prefer not to answer

3b. Where do you live?

On Reserve Off Reserve Prefer not to answer

6. Did you immigrate to Canada?

Yes No If yes, what year did you immigrate? _____

7. What is your highest level of education achieved?

- Less than high school
- High School
- Some Post-Secondary
- Trades Certificate or diploma
- Diploma
- University Degree

8. Last School Attended: _____

9. City of Last School Attended: _____

10. Which best describes your status before entering the program?

- Employed – a person having a job or business
- Employed in a trade occupation
- Employed as an apprentice
- Self Employed – Self-employed persons are working owners of an incorporated or unincorporated business, farm or professional practice, with or without paid help.
- Unemployed – without work, are available for work, and are actively seeking work.
- In school or training
- In Trades Foundation Training
- Not in the labour force – persons who, during the reference week, were unwilling or unable to offer or supply labour services under conditions existing in their labour markets (this includes persons who were full-time students currently attending school).

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If you answered 'Employed' or 'Self Employed', please complete questions 11 through 16. Otherwise continue to question 17.

If Employed or Self Employed

11. If Employed or Self Employed what are your:

Average Weekly Hours: _____ Average Hourly Wage: \$ _____

12. What is your employment type?

- Seasonal Employment – a job where an employee is working in an industry where employment levels rise or fall with the seasons (e.g., agriculture, fishing, logging and tourism)
- Temporary Employment – a job that has a predetermined end date or will end as soon as a specific project is completed.
- Casual Employment – when an employee's work hours vary substantially from one week to the next, if the employee is called to work by the employer when the need arises and not on a pre-arranged schedule, or if the employee does not usually get paid for time not worked and there is no indication from the employer about work on a regular basis for a long duration.
- Permanent Employment – when a job is expected to last as long as the employee wants the job and as long as business conditions permit.
- None of the above

13. What is your occupation? Provide 4 digit NOC code or describe the occupation for code entry later:

<http://www.cic.gc.ca/english/immigrate/skilled/noc.asp#find>

Occupation Level 1: _____

Occupation Level 2: _____

Occupation Level 3: _____

Occupation Level 4: _____

14. In which industry do you work? Please select the relevant NAICS code:

Sector Level 1: _____

Sector Level 2: _____

Sector Level 3: _____

15. Are you an Apprentice?

- Yes No Prefer not to answer

If Yes to above, are you registered with the Industry Training Authority (ITA)?

- Yes No Prefer not to answer

16. How long have you been employed in this job?

_____ Years plus _____ Months

(Integers only; if less than one month then enter zero)



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17. Have you received or are you receiving Employment Insurance (EI) benefits?

- Currently
- In the last month
- In the last 3 months
- In the last 36 months (3 years)
- In the last 60 months (5 years)

If yes to above, were these maternal/paternal benefits? Yes No

- None of the above (not eligible for EI)

18. Are you currently receiving Income Assistance?

- Yes No
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Participant Consent Form

As part of your participation in the Employment Services and Supports program, all Participants are required to complete two satisfaction surveys at approximately 3 months and 12 months following completion of their training ("Surveys"). The Surveys will ask basic questions about your satisfaction with the outcomes of training and whether the training met your employment needs. You may also be asked if you wish to, or may volunteer to, provide a testimonial regarding your program experience ("Testimonial").

Collection Notice

All personal information in the Participant Intake form, the Surveys, any Testimonial and other information related to your participation in the program ("Personal Information") is collected pursuant to sections 26(c), 26(e), and 27(1)(a) of the Freedom of Information and Protection of Privacy Act. This information will be used for administrative, evaluation and research purposes, including to determine your eligibility for participation in the program, and, in the case of any Testimonial, may be used and disclosed to publicly promote the program. This information will also be disclosed to the BC Ministry of Education for the purposes of evaluating and developing provincial training and education programs (Collectively, the "Purposes"). The Government of Canada ("Canada") provides funding for the Employment Services & Supports (ESS) program under the Canada-British Columbia Job Fund Agreement. Personal Information will be used to create reports about ESS programs in British Columbia that will be provided to Canada in aggregate form only. No personally identifiable information will be disclosed to Canada for this purpose.

If you have any questions about the use of this information, please contact Information Access Operations at 250-387-1321 or FOI.Requests@gov.bc.ca

Consent and Agreement

Effective as of the date set out below, and in consideration of the opportunity for me to participate in an Employment Services & Supports program, I:

- Certify that all of the information that I have provided is accurate and complete;
- Certify that I understand that my agreement to provide this information and complete the surveys is a condition of participation in the program;
- Consent to the collection (including indirect collection), disclosure, and use of my Personal Information by the Province of British Columbia for the Purposes;
- Consent to my Personal Information being used to contact me to conduct the Surveys and to request a Testimonial.

If you have any questions about the collection and use of this information, please contact the Director, Employment Services and Supports Program by telephone at 250-952-0642 or by mail at:

Director, Employment Services & Supports

Labour Market Division
PO Box 9189 Stn Prov Govt
Victoria BC V8W 9E6

I, the undersigned, hereby accept and agree to the above terms and conditions.

Print Name

Signature

Date (YYYY/MM/DD)

Canada



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through the Canada-British Columbia Job Fund.*